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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/630,377-Conf. #8948
	Filing Date	July 30, 2003
	First Named Inventor	Gianfranco D'amato
	Art Unit	1794
	Examiner Name	Not Yet Assigned
	Attorney Docket Number	03910/0211496-USO

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: 07278
☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:
07278

OR

☐ Firm or
Individual Name

Address

City

Country

State

Zip

Telephone

Email

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)
SIGNATURE of Applicant or Assignee of Record

Signature	<i>Luigi Fusco</i> <i>SEDA's OFFICER</i>		
Name	LUIGI FUSCO		
Date	11/12/2009	Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of 1 forms are submitted.